AO 440 (Rev. 06/12) Summons in a Civil Action

		DISTRICT COURT or the
	Southern Dis	strict of Illinois
Nathaniel O.	Brown	) ) )
Plaintiff( v. United States Department of Service	of Health and Human	) Civil Action No. 19-852
Defendan	((s)	)
	SUMMONS IN	A CIVIL ACTION
To: (Defendant's name and address	United States Department of 233 North Michigan Avenue Suite 600 Chicago, IL 60601	of Health and Human Services
A lawsuit has been fil	ed against you.	
are the United States or a Unit P. 12 (a)(2) or (3) — you mus	ed States agency, or an offic t serve on the plaintiff an ans	ou (not counting the day you received it) — or 60 days if you er or employee of the United States described in Fed. R. Civ. swer to the attached complaint or a motion under Rule 12 of on must be served on the plaintiff or plaintiff's attorney, vn, P.C.
If you fail to respond, You also must file your answe		entered against you for the relief demanded in the complaint.
		CLERK OF COURT
Date:		Signature of Clerk or Deputy Clerk

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Civil Action No. 19-852

## PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

This summons for (name	of individual and title, if any)		
ceived by me on (date)			
☐ I personally served th	e summons on the individual a	t (place)	
		on (date)	; or
☐ I left the summons at	the individual's residence or u	sual place of abode with (name)	
	, a persor	of suitable age and discretion who r	esides there,
on (date)	, and mailed a copy to t	he individual's last known address; o	or
☐ I served the summons	on (name of individual)		, who
designated by law to ac-	cept service of process on beha	lf of (name of organization)	
		on (date)	; or
☐ I returned the summo	ns unexecuted because		,
☐ Other (specify):			
My fees are \$	for travel and \$	for services, for a total of S	0.00
Y d 1	C	·	
I declare under penalty (	of perjury that this information	is true.	
		Server's signature	
		Printed name and title	

Additional information regarding attempted service, etc: